

Date: \_\_\_\_\_

**PLANNING BOARD**  
**SPECIAL PERMIT APPLICATION**

Rejection No: \_\_\_\_\_ Special Permit Application No. \_\_\_\_\_

**Applicant** (includes equitable owner or purchaser on a purchase and sales agreement:

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Telephone #: ( ) \_\_\_\_\_ Cell Phone #: ( ) \_\_\_\_\_

**Owner** (if other than Applicant):

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Telephone #: ( ) \_\_\_\_\_ Cell Phone #: ( ) \_\_\_\_\_

**Property Information:**

The land that is the subject of this Application is located on:

Assessors' Map # \_\_\_\_\_, Lot # \_\_\_\_\_, which said property lies in the

\_\_\_\_\_ Zoning District.

**Worcester County Registry of Deeds Information:**

Book # \_\_\_\_\_, Page # \_\_\_\_\_ Plan Recording # \_\_\_\_\_

This Special Permit Application is being requested under \_\_\_\_\_ section(s) of the Zoning By-Laws.

Detailed Nature of relief requested:

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**Designated Representative (if applicable): \*\* MUST BE NOTARIZED \*\***

Name of Representative: \_\_\_\_\_

Address of Representative: \_\_\_\_\_

Telephone #: ( ) \_\_\_\_\_

I hereby authorize \_\_\_\_\_ to represent my interest before the Planning Board in the Town of Warren with respect to Special Permit Application No. \_\_\_\_\_.

\_\_\_\_\_  
Signature of Owner or Equitable Owner

I hereby certify under the pains and penalties of perjury that the information contained within this application is true and complete.

\_\_\_\_\_  
Signature of Petitioner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Owner (if other than Petitioner)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Equitable Owner (Purchase & Sales Agreement)

\_\_\_\_\_  
Date

Town Clerk's Seal

Filing Fee Paid: \$\_\_\_\_\_

Certified Date/Time:

\_\_\_\_\_  
Nancy J. Lowell, Town Clerk

